

PROTECTED AREA PERMIT APPLICATION

LOCATION _____

PPN _____

Estimated Cost \$ _____

Zoning District _____

		Registration No. _____	
OWNER	_____	APPLICANT/CONTRACTOR	_____
Address	_____	Address	_____
	_____		_____
Phone	_____	Phone	_____
		Alt. Phone	_____

Filing Fee of \$50.00

Deposit for Engineering Review \$1,000.00 (unless lesser or greater amount specified)

Permit fee \$75.00.

A 1% State Tax fee is assessed to all permits.

_____	_____	_____
APPLICANT (print name)	Signature	Date

_____ is hereby granted permission by the City of Willoughby Hills to do improvements to a protected area at: _____ for the purpose of _____ according to the provisions of Section 1167 of the Codified Ordinances of the City.

_____ will be responsible for all excavation, back fill, repair, and restoration to the satisfaction of the City of Willoughby Hills. Applicant will erect and maintain all required soil and water protections.

A deposit in the amount of \$ _____ is hereby acknowledged to cover cost of Engineering review. This deposit is to cover cost incurred by the city for engineering review. Any additional cost is the responsibility of the applicant, if cost incurred is less than deposits the balance will be refunded less a \$30.00 administrative fee.

_____	_____	_____
CITY OFFICIAL (print name)	Signature	Date

PLEASE RETURN THIS COMPLETED FORM, REQUIRED DOCUMENTS AND PAYMENTS TO

Willoughby Hills Building & Zoning Department – 35405 Chardon Road—Willoughby Hills OH 44094

OFFICE USE: Amount Recv'd\$ _____ Cash/Check# _____ Permit # _____ Recv'd By _____ Date _____
Completion Date: _____ Final Inspection Date: _____ Bond Return Authorized: _____